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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY, CAMDEN VICINAGE		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself				
		About Debtor 1:	ı	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name				
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	First name Anna Middle name	First name Middle name		
	Bring your picture identification to your meeting with the trustee.	Slovick Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years Include your married or maiden names and any assumed, trade names and doing business as names. Do NOT list the name of any separate legal entity	Betty A. Slovick Betty Anne Slovick			
	such as a corporation, partnership, or LLC that is not filing this petition.				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2416			

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Debtor 1 Betty Anna Slovick Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Your Employer Identification Number					
	(EIN), if any.	EIN	EIN			
5.	Where you live		If Debtor 2 lives at a different address:			
		301 S Hildebrand Ave 18F Glendora, NJ 08029				
		Number, Street, City, State & ZIP Code Camden	Number, Street, City, State & ZIP Code			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing	Check one:	Check one:			
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known)

Part 2: Tell the Court About Your Bankruptcy Case 7. Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number District When Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When District Case number, if known Do you rent your Go to line 12. □ No. residence? Has your landlord obtained an eviction judgment against you? Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1

Betty Anna Slovick

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Deb	tor 1 Betty Anna Slovid	k		Case number (if known)				
Par	Report About Any Bu	sinesses	You Own as a Sole Proprie	etor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.					
		☐ Yes.	Name and location of bu	siness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	tte & ZIP Code				
	it to this petition.		Check the appropriate be	ox to describe your business:				
	·		☐ Health Care Busi	ness (as defined in 11 U.S.C. § 101(27A))				
			☐ Single Asset Rea	I Estate (as defined in 11 U.S.C. § 101(51B))				
			☐ Stockbroker (as o	defined in 11 U.S.C. § 101(53A))				
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))				
			☐ None of the above	e				
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business</i> <i>debtor?</i> For a definition of <i>small</i> <i>business debtor</i> , see 11 U.S.C. § 101(51D).	deadline: operation	s. If you indicate that you are ns, cash-flow statement, and s.C. § 1116(1)(B). I am not filing under Cha	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure pter 11. 11, but I am NOT a small business debtor according to the definition in the Bankruptcy				
		☐ Yes.		11, I am a small business debtor according to the definition in the Bankruptcy Code, and ed under Subchapter V of Chapter 11.				
		☐ Yes.		11, I am a small business debtor according to the definition in the Bankruptcy Code, and er Subchapter V of Chapter 11.				
Par	Report if You Own or	Have Any	/ Hazardous Property or Ar	ny Property That Needs Immediate Attention				
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat	☐ Yes.						
	of imminent and identifiable hazard to	ш тез.	What is the hazard?					
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number, Street, City, State & Zip Code				
				inumber, street, city, state a zip code				

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Debtor 1 Betty Anna Slovick

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Betty Anna Slovic	k			Case number (if known)	
Part	6: Answer These Quest	ions for Re	porting Purposes				
16.	What kind of debts do you have?	16a.		y consumer debts? Consu		d in 11 U.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.		y business debts? Busine investment or through the o			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts yo	ou owe that are not consum	er debts or business of	debts	
17.	Are you filing under Chapter 7?	□ No.	o. I am not filing under Chapter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		7. Do you estimate that afte e available to distribute to un		y is excluded and administrative expenses	
	administrative expenses are paid that funds will be available for		■ No				
			□Yes				
	distribution to unsecured creditors?						
18.	How many Creditors do you estimate that you owe?	1 -49		□ 1,000-5,000		☐ 25,001-50,000	
		□ 50-99		□ 5001-10,000		□ 50,001-100,000	
		100-19	-	□ 10,001-25,00	0	☐ More than100,000	
		200-99	99				
19.	How much do you estimate your assets to	S 0 - \$5	50,000	<u> </u>		☐ \$500,000,001 - \$1 billion	
	be worth?		1 - \$100,000	□ \$10,000,001 · □ \$50,000,001 ·		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion	
			01 - \$500,000 01 - \$1 million	☐ \$100,000,001		☐ More than \$50 billion	
			- · · · · · · · · · · · · · · · · · · ·				
20.	How much do you estimate your liabilities	\$0 - \$5		□ \$1,000,001 - □ \$10,000,001	•	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion	
	to be?		01 - \$100,000 101 - \$500,000	□ \$10,000,001 · □ \$50,000,001 ·		□ \$1,000,000,001 - \$10 billion	
			01 - \$500,000 01 - \$1 million	□ \$100,000,001		☐ More than \$50 billion	
Dort	7. Sign Polow						
Part		I hove ov	ominad this patition, and I	dealars under populty of pe	arium, that the informa	tion provided in true and correct	
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
					n attorney to help me fill out this		
		I request	relief in accordance with t	he chapter of title 11, United	d States Code, specifi	ed in this petition.	
I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 13-13-14 and 3571. /s/ Betty Anna Slovick							
		Betty A	nna Slovick of Debtor 1		Signature of Debtor 2		
		Executed	on March 10, 2025		Executed on		
			MM / DD / YYYY		MM / [DD / YYYY	

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Debtor 1 Betty Anna Slovick Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/S/ Lee IVI. I	eriman, Esquire	Dale	March 10, 2025
Signature of	Attorney for Debtor		MM / DD / YYYY
Lee M. Per	Iman, Esquire		
Printed name			
Lee M. Per	lman, Esquire		
Firm name			
1926 Greer Cherry Hill	ntree Rd Ste 100 , NJ 08034		
Number, Street, 0	City, State & ZIP Code		
Contact phone	856-751-4224	Email address	ecf@newjerseybankruptcy.com
NJ			
Bar number & Sta	ate		

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Fill in this infor	mation to identify your	case:		
Debtor 1				
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JE	RSEY, CAMDEN VICINAGE	
Case number				
(if known)				☐ Check if this i
				amended filin

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	
		Value o	f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	12,100.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	12,100.00
Pai	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	15,431.95
	Your total liabilities	\$	15,431.95
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,909.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,918.00
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	edules.
	■ Yes What kind of debt do you have?		

Official Form 106Sum

the court with your other schedules.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

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Debtor 1 Betty Anna Slovick Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

\$_____0.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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			Documen	l Page 10 01 49		
Fill in this infor	rmation to identify yo	our case ar	nd this filing:			
Debtor 1	Botty Anna Slo	wick				
Debior 1	Betty Anna Slo		Middle Name	Last Name		
Debtor 2	First Name		Middle Nove	Loot Nome		
(Spouse, if filing)	First Name		Middle Name	Last Name		
United States B	ankruptcy Court for the	e: DISTR	ICT OF NEW JERSE	EY, CAMDEN VICINAGE		
Case number						☐ Check if this is an
						amended filing
Official Fo	orm 106A/B					
		nort.	-			
	le A/B: Pro					12/15
think it fits best.	Be as complete and acc ore space is needed, atta	urate as po	ssible. If two married	ee. If an asset fits in more than o people are filing together, both a On the top of any additional pag	re equally responsible for	supplying correct
Part 1: Describe	e Each Residence, Build	ding, Land, d	or Other Real Estate Y	ou Own or Have an Interest In		
1 Do you own a-	have any logal or oguit	ahla interce	t in any residence	ilding, land, or similar property?		
1. Do you own or	nave any legal or equit	able interes	t in any residence, but	nding, iand, or similar property?		
No. Go to Pa	art 2.					
☐ Yes. Where	is the property?					
Part 2: Describe	e Your Vehicles					
				cles, whether they are registed G: Executory Contracts and U		vehicles you own that
someone eise di	ives. Il you lease a ve	nicie, aiso i	eport it on <i>Scriedule</i>	G. Executory Contracts and O	riexpirea Leases.	
3. Cars, vans, t	rucks, tractors, spor	t utility vel	nicles, motorcycles			
□ No						
■ Yes						
— 163						
3.1 Make:	Chevy		Who has an interes	t in the property? Check one		claims or exemptions. Put
Model:	Equinox		■ Debtor 1 only	The property is encontained		red claims on Schedule D: aims Secured by Property.
Year:	2012		☐ Debtor 2 only			
Approxima	ate mileage:	87000	Debtor 1 and Deb	otor 2 only	Current value of the entire property?	Current value of the portion you own?
Other info				e debtors and another		
					\$2,900.00	¢2 000 00
			(see instructions)	community property	φ2,900.00	\$2,900.00
			(cco mondonono)			
				vehicles, other vehicles, and els, snowmobiles, motorcycle ac		
Ехатіріез. Бо	ais, irailers, motors, pe	ersoriai wai	ercrait, lishing vesse	eis, snowmobiles, motorcycle ac	ccessories	
■ No						
☐ Yes						
5 Add the doll	lar value of the portic	on you owi	n for all of your entr	ies from Part 2, including an	y entries for	¢2.000.00
.pages you h	nave attached for Par	t 2. Write t	hat number here		=> _	\$2,900.00
	e Your Personal and Ho					
Do you own or	have any legal or eq	uitable int	erest in any of the f	ollowing items?		Current value of the
						portion you own? Do not deduct secured

claims or exemptions.

Entered 03/10/25 23:56:31 Case 25-12476-JNP Doc 1 Filed 03/10/25 Page 11 of 49 Document Debtor 1 **Betty Anna Slovick** Case number (if known) 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe..... \$1.500.00 Personal furniture and miscellaneous personalty 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$250.00 Personal electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Clothing \$200.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$100.00 Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$2,050.00

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Dec	otor 1 Betty Anna	Slovick			Case number (if known)	
Dart	4: Describe Your Fina	ncial Accor	te.			
				any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□No			ome, in a safe deposit box, and on	. , ,	
					Cash	\$100.00
		-		ounts; certificates of deposit; shares s with the same institution, list each Institution name:		nouses, and other similar
•	• res					
		17.1.	Checking	PNC Bank *9274		\$500.00
		17.2.	Savings	PNC Bank *1894		\$1,000.00
18.	Bonds, mutual funds Examples: Bond fund			okerage firms, money market acco	unts	
	No		landitutina na innun			
L	☐ Yes		Institution or issuer	name:		
_	joint venture	stock and	interests in incorp	orated and unincorporated busir	nesses, including an interes	t in an LLC, partnership, and
_	No	. (all and the an			
	Yes. Give specific in		about tnem me of entity:		% of ownership:	
	Negotiable instrumen	ts include p	personal checks, cas	otiable and non-negotiable instru shiers' checks, promissory notes, a ansfer to someone by signing or de	nd money orders.	
	☐ Yes. Give specific in		about them uer name:			
_	Retirement or pension Examples: Interests in			403(b), thrift savings accounts, or o	ther pension or profit-sharing	plans
	☐ Yes. List each accou		tely. of account:	Institution name:		
_		sed deposi	ts you have made so	that you may continue service or public utilities (electric, gas, water)		nies, or others
	■ Yes			Institution name or individua	al:	
				Security deposit with Is	andlord	\$500.00
	Annuities (A contract No	for a perio	dic payment of mone	ey to you, either for life or for a num	nber of years)	
		lssuer nam	ne and description.			

Official Form 106A/B Schedule A/B: Property page 3

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D	eptor 1 Betty	Anna Siovick Case	e number (<i>it known,</i>)
24.		education IRA, in an account in a qualified ABLE program, or under a qualified (b)(b)(1), 529A(b), and 529(b)(1).	ed state tuition pr	ogram.
	■ No □ Yes	Institution name and description. Separately file the records of any interests.	.11 U.S.C. § 521(c	·):
25.	Trusts, equitab	ble or future interests in property (other than anything listed in line 1), and rig	hts or powers ex	tercisable for your benefit
	■ No		•	·
	☐ Yes. Give sp	pecific information about them		
26.		rights, trademarks, trade secrets, and other intellectual property ernet domain names, websites, proceeds from royalties and licensing agreements		
	_	pecific information about them		
27.		chises, and other general intangibles Iding permits, exclusive licenses, cooperative association holdings, liquor licenses,	professional licen	ses
	☐ Yes. Give sp	pecific information about them		
M	oney or property	y owed to you?		Current value of the
				portion you own?Do not deduct secured claims or exemptions.
28.	Tax refunds ov	wed to you		
	■ No			
	☐ Yes. Give spe	ecific information about them, including whether you already filed the returns and th	ie tax years	
29.	Family support Examples: Pas	t st due or lump sum alimony, spousal support, child support, maintenance, divorce s	settlement, propert	ry settlement
		ecific information		
30.	Examples: Unp	s someone owes you paid wages, disability insurance payments, disability benefits, sick pay, vacation pa nefits; unpaid loans you made to someone else	y, workers' comp	ensation, Social Security
	Yes. Give sp	pecific information		
		Inspira Health for copay overpayments		\$50.00
				
31.		surance policies alth, disability, or life insurance; health savings account (HSA); credit, homeowner's	s, or renter's insura	ance
	Yes. Name th	ne insurance company of each policy and list its value.		
		Company name: Beneficiary:		Surrender or refund value:
		John Hancock whole life cash value		\$5,000.00
32.		n property that is due you from someone who has died beneficiary of a living trust, expect proceeds from a life insurance policy, or are curredied.	ently entitled to re	ceive property because
	■ No			
	☐ Yes. Give sp	pecific information		
33.		t third parties, whether or not you have filed a lawsuit or made a demand for paidents, employment disputes, insurance claims, or rights to sue	payment	
		pe each claim		

Official Form 106A/B Schedule A/B: Property page 4

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Debtor 1 Betty Anna Slovick Case number (if known)

Potential Nursing Home Neglect - Barclay Health, Cherry Hill,

Date	of Incident Januar	ry 15, 2025		Unknown
34. Other contingent and unliquidated claims ■ No	of every nature, inclu	iding counterclaims o	of the debtor and rights to	set off claims
Yes. Describe each claim				
35. Any financial assets you did not already li	st			
No				
☐ Yes. Give specific information				
36. Add the dollar value of all of your entries for Part 4. Write that number here	•		•	\$7,150.00
Part 5: Describe Any Business-Related Property Y	ou Own or Have an Inter	est In. List any real esta	ate in Part 1.	
37. Do you own or have any legal or equitable interes	st in any business-relate	ed property?		
No. Go to Part 6.				
Yes. Go to line 38.				
Part 6: Describe Any Farm- and Commercial Fishin If you own or have an interest in farmland, list		Own or Have an Interes	st In.	
46. Do you own or have any legal or equitable	interest in any farm-	or commercial fishin	g-related property?	
■ No. Go to Part 7.	•		,	
☐ Yes. Go to line 47.				
Part 7: Describe All Property You Own or Have	e an Interest in That You	u Did Not List Above		
53. Do you have other property of any kind you Examples: Season tickets, country club men ■ No		?		
■ No □ Yes. Give specific information				
54. Add the dollar value of all of your entries	from Dort 7 Write th	at number bere		£0.00
54. Add the dollar value of all of your entries	FITOIII FAIL 7. WITE III	at number nere		\$0.00
Part 8: List the Totals of Each Part of this Form	1			
55. Part 1: Total real estate, line 2				\$0.00
56. Part 2: Total vehicles, line 5		\$2,900.00		
57. Part 3: Total personal and household ite	ms, line 15	\$2,050.00		
58. Part 4: Total financial assets, line 36		\$7,150.00		
59. Part 5: Total business-related property, I		\$0.00		
60. Part 6: Total farm- and fishing-related pr		\$0.00		
61. Part 7: Total other property not listed, lin		\$0.00	O annual	
62. Total personal property. Add lines 56 thro	ugn 61	\$12,100.00	Copy personal property t	otal \$12,100.00
63. Total of all property on Schedule A/B. Ad	ld line 55 + line 62			\$12,100.00

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Fill in this information to identify your case:						
Debtor 1	Betty Anna Slovi	ck				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY, CAMDEN VICINAGE				
Case number (if known)					☐ Check if this is an	
(ii kilowii)					amended filing	

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the I	Property \	rou Claim a	s Exempt

☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.				
	2012 Chevy Equinox 87000 miles Line from Schedule A/B: 3.1	\$2,900.00		\$2,900.00	11 U.S.C. § 522(d)(2)			
	Line Irom Scriedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit				
	Personal furniture and miscellaneous personalty	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)			
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit				
	Personal electronics Line from Schedule A/B: 7.1	\$250.00		\$250.00	11 U.S.C. § 522(d)(3)			
	Elle Holli Genedale Av.B. 7.1			100% of fair market value, up to any applicable statutory limit				
	Clothing Line from Schedule A/B: 11.1	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)			
	Line nom <i>Schedule AVD</i> . TTT			100% of fair market value, up to any applicable statutory limit				
	Jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(4)			
	LING HOLL GOLDGUIG PAD. 12-1			100% of fair market value, up to any applicable statutory limit				

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Debtor	1 Betty Anna Slovick			Case number (if known)		
	ief description of the property and line on hedule A/B that lists this property	Current value of the An portion you own		ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	ash ne from <i>Schedule A/B</i> : 16.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)	
LII	le IIIIII Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit		
	necking: PNC Bank *9274 ne from Schedule A/B: 17.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)	
LII	le IIIIII Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit		
	avings: PNC Bank *1894	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(5)	
LII	ie IIOIII Schedule A/B. 11.2			100% of fair market value, up to any applicable statutory limit		
	ecurity deposit with landlord	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)	
LII	ie from Schedule A/B. 22. 1			100% of fair market value, up to any applicable statutory limit		
	spira Health for copay verpayments	\$50.00		\$50.00	11 U.S.C. § 522(d)(5)	
	ne from <i>Schedule A/B</i> : 30.1			100% of fair market value, up to any applicable statutory limit		
	ohn Hancock whole life cash value	\$5,000.00		\$5,000.00	11 U.S.C. § 522(d)(8)	
<u> </u>	io nom concurse A/D. Ci.			100% of fair market value, up to any applicable statutory limit		
	otential Nursing Home Neglect - arclay Health, Cherry Hill, NJ	Unknown		\$13,275.00	11 U.S.C. § 522(d)(5)	
Da	ate of Incident January 15, 2025 the from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit		
	e you claiming a homestead exemption ubject to adjustment on 4/01/25 and every in No			led on or after the date of adjustmer	nt.)	
		ad by the exemption w	ithin 1	215 days before you filed this case.	2	
Ц	□ No	or by the exemption w	iumii l	,2 10 days belole you liled tills case	:	
	☐ Yes					

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Fill in this information to identify your case:						
Debtor 1	Betty Anna Slovi	ck				
	First Name	Middle Name	Last Name	_		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name	_		
United States Bankruptcy Court for the:		DISTRICT OF NEW JE	RSEY, CAMDEN VICINAGE			
Case number						
(if known)				☐ Check if this is an		
				amended filing		

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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			Documer	nt Page 18 of 4	19		
Fill in	this infor	mation to identify your cas	se:				
Debto	or 1	Betty Anna Slovick					
		First Name	Middle Name	Last Name			
Debto	or 2 e if, filing)	First Name	Middle Name	Last Name			
				SEY, CAMDEN VICINAG	_		
Office	u States Da	Tikiupicy Court for the.	DISTRICT OF NEW JER	SET, CAMBEN VICINAG			
	number						
(if know	n)					_	c if this is an
						amen	ded filing
Offic	ial Forr	m 106E/F					
		E/F: Creditors Wh	o Have Unsecu	red Claims			12/15
		d accurate as possible. Use P			or craditors with NON	DDIODITY claims I	
	nd case nu	ntinuation Page to this page. I Imber (if known). All of Your PRIORITY Unse	•	n to report in a Part, do not f	ile that Part. On the to	op of any additiona	l pages, write your
		ors have priority unsecured c					
	No. Go to I	• •	iainis against you :				
	Yes.	artz.					
		ır priority unsecured claims. If	a creditor has more than o	ne priority unsecured claim li	et the creditor cenarate	ly for each claim. Fo	r each claim listed
ide po	entify what ty ossible, list th	ype of claim it is. If a claim has be ne claims in alphabetical order a than one creditor holds a partic	oth priority and nonpriority ccording to the creditor's na	amounts, list that claim here a ame. If you have more than tw	and show both priority a	nd nonpriority amou	nts. As much as
		nation of each type of claim, see					
`	•			,	Total claim	Priority amount	Nonpriority amount
2.1		I Revenue Service	Last 4 digits of	account number	\$0.00	\$0.00	\$0.00
	,	reditor's Name lized Insolvency	When was the o	leht incurred?			
	Operat	•	Wildir Was this t			•	
	PO Box	x 7346					
		elphia, PA 19101-7346 Street City State Zip Code	As of the date v	rou file the eleim io. Chook	all that apply		
,		ed the debt? Check one.	`	ou file, the claim is: Check a	ян инас арріу		
	Debtor 1		☐ Contingent☐ Unliquidated				
	Debtor 2	,	<u> </u>				
	_	and Debtor 2 only	☐ Disputed Type of PRIORI	TY unsecured claim:			
	_	•	Domestic sup				
_		one of the debtors and another					
		this claim is for a community	_	ertain other debts you owe the	· ·		
I	s the claim	subject to offset?		ath or personal injury while yo	ou were intoxicated		

■ No

☐ Yes

☐ Other. Specify

For notice purposes only

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Debtor 1 Betty Anna Slovick		Case number (if known)					
2.2	State of New Jersey	Last 4 digits of account number \$0.00	\$0.00 \$0.00				
	Priority Creditor's Name PO Box 283 Trenton, NJ 08602	When was the debt incurred?					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
1	Who incurred the debt? Check one.	☐ Contingent					
I	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:					
	☐ At least one of the debtors and another	☐ Domestic support obligations					
ı	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government					
	s the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated					
I	■ No	☐ Other. Specify					
l	☐ Yes	For notice purposes only					
4. Li ur th	nsecured claim, list the creditor separately for each c an one creditor holds a particular claim, list the other	alphabetical order of the creditor who holds each claim. If a creditor has more talim. For each claim listed, identify what type of claim it is. Do not list claims already creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	included in Part 1. If more				
Pa	art 2.		Total claim				
4.1	Cardiovascular Associates of DE Valley	Last 4 digits of account number 1619	\$132.45				
	Nonpriority Creditor's Name The Heart House 210 West Atlantic Ave Haddon Heights, NJ 08035	When was the debt incurred?	_				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	\square Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did no	ut				
	Is the claim subject to offset?	report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Medical Bill					

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Debtor 1 Betty Anna Slovick		Case number (if known)	
4.2	Carepayment	Last 4 digits of account number 6342	\$308.50
	Nonpriority Creditor's Name	When we the debt in some do	
	PO Box 2398 Omaha. NE 68103	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	■ Debtor 1 only	☐ Contingent	
	_	☐ Unliquidated	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<u> </u>	Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	■ Other. Specify Medical Bill (Jefferson Health)	
4.3	ComenityCapital/Boscov Nonpriority Creditor's Name	Last 4 digits of account number 1187	\$519.00
	Attn: Bankruptcy Dept	When was the debt incurred? 2024	
	Po Box 182125		
	Columbus, OH 43218		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.4	In a wine I I a a like	Lost 4 digits of account number	\$285.00
4.4	Inspira Health Nonpriority Creditor's Name	Last 4 digits of account number	\$205.00
	PO Box 547	When was the debt incurred?	
	Wheeling, IL 60090		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Bill	

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Debtor	Betty Anna Slovick		Case number (if known)	
4.5	Jpmcb	Last 4 digits of account number	2956	\$7,453.00
	Nonpriority Creditor's Name MailCode LA4-7100 700 Kansas Lane Monroe, LA 71203	When was the debt incurred?	2024	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Student loans	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	•	
	Yes	Other. Specify Credit Card	I Purchases	
4.6	PNC Financial Nonpriority Creditor's Name	Last 4 digits of account number	1206	\$3,976.00
	Attn: Bankruptcy 300fifth Ave Pittsburgh, PA 15222	When was the debt incurred?	2024	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	l Purchases	
4.7	PNC Financial Services Nonpriority Creditor's Name	Last 4 digits of account number	9790	\$2,758.00
	Attn: Bankruptcy 300 Fifth Ave Pittsburgh, PA 15222	When was the debt incurred?	2024	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	•	
	☐ Yes	■ Other. Specify Credit Card	l Purchases	

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Betty Anna Slovick	Case number (if known)				
TD Bank	Last 4 digits of account number	\$			
Nonpriority Creditor's Name	When was the debt incurred?				
1701 Route 70 E Cherry Hill, NJ 08003	when was the dept incurred?				
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts				
□Yes	■ Other. Specify For notice purposes only				

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
Total	6a.	Domestic support obligations	6a.	\$	0.00
claims from Part 1	6h	Toyon and portain other debte you are the government	6b.	•	0.00
from Part 1	6b.	Taxes and certain other debts you owe the government		\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	15,431.95
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	15,431.95

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Fill in this infor	rmation to identify your	case:	
Debtor 1	Betty Anna Slovi	ck	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States B	ankruptcy Court for the:	DISTRICT OF NEW JE	RSEY, CAMDEN VICINAGE
Case number			
(if known)			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Franklin Square Village Apartments
301 South Hildebrand Ave
Glendora, NJ 08029

State what the contract or lease is for
Residential lease

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Fill in this	s information to identify your	case:			
Debtor 1	Betty Anna Slovi	ck			
D - h t 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	DISTRICT OF NEW JEI	RSEY, CAMDEN VICIN	AGE	
Case num	her				
(if known)				☐ Check if thi amended fi	
Officia	ll Form 106H				Ū
	dule H: Your Cod	ebtors			12/15
fill it out, a your name	and number the entries in the eand case number (if known you have any codebtors? (If	boxes on the left. Attach . Answer every question	n the Additional Page t	tion. If more space is needed, copy the Addition this page. On the top of any Additional Pa	ges, write
■ No					
☐ Ye	S				
	thin the last 8 years, have yo na, California, Idaho, Louisiana			ry? (Community property states and territories ington, and Wisconsin.)	include
■ No	. Go to line 3.				
	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the pe sure you have listed the creditor on Schedu 16G). Use Schedule D, Schedule E/F, or Sch	ıle D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you over Check all schedules that apply:	ve the debt
3.1				☐ Schedule D. line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	

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	in this information to identify you	our case: ona Slovick								
Del	otor 2	III OIOVICK			_					
	ted States Bankruptcy Court fo	r the: DISTRICT OF NEW	JERSEY, CAMDEN V	ICINAGE	<u> </u>					
	se number 		-			Check if this i An amend A suppler	led f	showin	g postpetitior	
0	fficial Form 106I					MM / DD/	YYY	ſΥ		
S	chedule I: Your I	ncome								12/15
sup spo atta	as complete and accurate as plying correct information. If use. If you are separated and ch a separate sheet to this for the control of the c	you are married and not fili your spouse is not filing w rm. On the top of any addit	ng jointly, and your ith you, do not inclu	spouse i	s liv nati	ing with you, inc	lude	e infornse. If mo	nation about ore space is	t your needed,
1.	Fill in your employment information.		Debtor 1	Debtor 1			Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with information about additional	D, Employment status	☐ Employed			☐ Emp	☐ Employed			
		Employment status	■ Not employed			☐ Not	emp	loyed		
	employers.	Occupation	Retired							
	Include part-time, seasonal, of self-employed work.	Employer's name								
	Occupation may include stud or homemaker, if it applies.	ent Employer's address								
		How long employed t	there?							
Par	t 2: Give Details About	Monthly Income								
	mate monthly income as of tuse unless you are separated.	ne date you file this form. If	you have nothing to r	eport for	any	line, write \$0 in th	e sp	ace. Ind	clude your no	n-filing
-	u or your non-filing spouse have e space, attach a separate she		ombine the informatio	n for all e	mple	oyers for that pers	on c	on the li	nes below. If	you need
						For Debtor 1			btor 2 or ing spouse	
2.	List monthly gross wages, deductions). If not paid mont			2.	\$	0.00	. :	\$	N/A	-
3.	Estimate and list monthly of	vertime pay.		3.	+\$	0.00		+\$	N/A	_
4.	Calculate gross Income. A	dd line 2 + line 3.		4.	\$	0.00		\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Betty Anna Slovick	_	Case	number (<i>if known</i>)			
				For	Debtor 1		ebtor 2 or	
	Con	by line 4 here	4.	\$	0.00	non-f	iling spouse N/A	
	77	,		Ť-	0.00	—	14/74	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	
	5e.	Insurance	5e.	\$_	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.+	\$_ \$	0.00	_ \$	N/A N/A	
^		· · · · · · · · · · · · · · · · · · ·	_	· —				
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	1					
		settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	1,839.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: SNAP	e 8f.	\$	70.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,909.00	\$	N/A	
10	Cal	culate monthly income. Add line 7 + line 9.	10. \$		1,909.00 + \$		N/A = \$ 1,	909.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.		1,909.00			303.00
11.	State Included the	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depend		•		hedule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certallies					12. \$ 1 ,	909.00
13.	Do y	you expect an increase or decrease within the year after you file this form No.	ı?				monthly in	come
		Yes. Explain:						

Fills	in this informs	ation to identify yo	nir casa.			1		
	tor 1					Chr	eck if this is:	
Dep	ioi i	Betty Anna S	SIOVICK			Che	An amended filing	
	tor 2							wing postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bank	ruptcy Court for the	VICINA	CT OF NEW JERSEY, CA GE	MDEN		MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	orm 106J				1		
So	chedule	J: Your	Exper	nses				12/1:
info	ormation. If member (if know	nore space is ne n). Answer ever	eded, atta y questio	. If two married people ar ich another sheet to this n.				
Par 1.	t 1: Desci	ribe Your House nt case?	nold					
	No. Go to		n a separ	ate household?				
		lo		al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of De	btor 2.	
2.	Do you hay	e dependents?	■ No					
۷.	Do not list D Debtor 2.	-	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents							☐ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.	Do your exp	penses include		No				□ 165
		f people other to d your depende	nan _	Yes				
Par		nate Your Ongoi						
exp	imate your ex enses as of a plicable date.	a date after the b	our bankr pankrupto	uptcy filing date unless y y is filed. If this is a supp	ou are using this f plemental <i>Schedul</i> e	orm as a s e <i>J</i> , check t	upplement in a Cha the box at the top o	apter 13 case to report of the form and fill in the
the	value of suc	h assistance and		government assistance i			Your exp	ongo
(Off	ficial Form 10	061.)					Tour exp	enses
4.		or home owners		ses for your residence. I or lot.	nclude first mortgag	e 4.	\$	463.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner's	s, or renter	's insurance		4b.	·	0.00
		•		upkeep expenses		4c.	· ————	0.00
	4d. Home	owner's associat	ion or con	dominium dues		4d.		0.00
5	Additional	mortanaa navm	nte for w	our residence, such as ho	ma aquity lagge	5	2	0.00

Debtor 1 Be	etty Anna Slovick	Case num	ber (if known)	
S. Utilities:				
	ectricity, heat, natural gas	6a.	\$	46.00
	ater, sewer, garbage collection	6b.	\$	0.00
	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	85.00
	her. Specify: Cell phone	6d.	\$	35.00
	d housekeeping supplies	7.	\$	400.00
	re and children's education costs	8.	\$	0.00
	յ, laundry, and dry cleaning	9.	\$	30.00
_	Il care products and services	10.	\$	75.00
	and dental expenses	11.	\$	400.00
	ortation. Include gas, maintenance, bus or train fare.		·	400.00
	nclude car payments.	12.	\$	60.00
	nment, clubs, recreation, newspapers, magazines, and books	13.	\$	27.00
. Charitab	ole contributions and religious donations	14.	\$	20.00
. Insuranc	ce.		-	
Do not in	clude insurance deducted from your pay or included in lines 4 or 20.			
15a. Lif	e insurance	15a.	\$	0.00
15b. He	ealth insurance	15b.	\$	0.00
15c. Ve	ehicle insurance	15c.	\$	177.00
15d. Ot	her insurance. Specify:	15d.	\$	0.00
. Taxes. D	Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:		16.	\$	0.00
. Installm	ent or lease payments:			
17a. Ca	ar payments for Vehicle 1	17a.	\$	0.00
17b. Ca	ar payments for Vehicle 2	17b.	\$	0.00
17c. Ot	her. Specify:	17c.	\$	0.00
17d. Ot	her. Specify:	17d.	\$	0.00
Your pay	yments of alimony, maintenance, and support that you did not report a		_	0.00
	d from your pay on line 5, Schedule I, Your Income (Official Form 106I)) . 18.		0.00
_	syments you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	al property expenses not included in lines 4 or 5 of this form or on Sci			
	ortgages on other property	20a.		0.00
	eal estate taxes	20b.		0.00
	operty, homeowner's, or renter's insurance	20c.		0.00
	aintenance, repair, and upkeep expenses	20d.	·	0.00
	omeowner's association or condominium dues	20e.		0.00
. Other: S	pecify: Auto maintenance	21.	+\$	100.00
. Calculat	e your monthly expenses			
22a. Add	l lines 4 through 21.		\$	1,918.00
22b. Cop	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	I line 22a and 22b. The result is your monthly expenses.		\$	1,918.00
o. Add	= == and ===. The result to your monthly expenses.			1,310.00
	e your monthly net income.			
23a. Co	ppy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,909.00
23b. Co	ppy your monthly expenses from line 22c above.	23b.	-\$	1,918.00
				<u> </u>
	ubtract your monthly expenses from your monthly income.	22	•	0.00
Th	ne result is your monthly net income.	23c.	\$	-9.00
For examp	expect an increase or decrease in your expenses within the year after pole, do you expect to finish paying for your car loan within the year or do you expect your to the terms of your mortgage?			or decrease because o
— No.	Evolain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Betty Anna Slovic	:k			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JEF	RSEY, CAMDEN VICINAGE		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Fori	m 106Dec				
Declarat	tion About a	n Individual	Debtor's Sche	عمليله	4045
Deciara	HOH ADOUL 8	III IIIuIViuuai	Debitor 3 Scrie	uuics	12/15
lf 4aa	a a ula a ua filiu u ta uath a			.f.,	
ir two married p	eopie are ming together	, both are equally respon	nsible for supplying correct in	irormation.	
You must file th	is form whenever you fi	le bankruptcy schedules	or amended schedules. Mak	ng a false statemen	t, concealing property, or
obtaining mone	y or property by fraud in	n connection with a bank	ruptcy case can result in fine		
years, or both. 1	I8 U.S.C. §§ 152, 1341, 1	519, and 3571.			
Sig	n Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out bankru	iptcy forms?	
■ No					
□ Vec	Name of person			Attach Rankrunt	cy Petition Preparer's Notice,
☐ 103.					Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed with	this declaration an	d
X /s/ Ref	tty Anna Slovick		Х		
	Anna Slovick		Signature of Debto	or 2	
	ire of Debtor 1		Oignatare of Bobte	·· -	
- 3					

Date March 10, 2025

Date _

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	in th	is inform	ation to identify you							
Deb	otor 1		Betty Anna Slov	ick Middle Name		Last Name				
Deb	otor 2		ristivanie	Wildele Wallie		Last Name				
	use if,		First Name	Middle Name		Last Name				
Uni	ted S	tates Ban	kruptcy Court for the:	DISTRICT OF NEW J	ERSEY,	CAMDEN VICINAGE				
1	se nui	mber							neck if this is an nended filing	
Sta Be a info	atei as coi rmati	ment omplete ar	nd accurate as possi ore space is needed,	Affairs for Indivible. If two married peop attach a separate sheet	le are fil	ing together, both are	equally responsible			
num		_). Answer every que	stion. arital Status and Where '	You Live	d Refore				
1.			current marital statu		TOU LIVE	a Belole				
	_	-								
		Married								
	-	Not marr	iea							
2.	During the last 3 years, have you lived anywhere other than where you live now?									
		■ No								
		No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.								
	Deb	otor 1:		Dates Debto	or 1	Debtor 2 Prior Ad	ldress:		Dates Debtor 2 lived there	
3.				ver live with a spouse or						
state	es an	d territorie	s include Arizona, Ca	lifornia, Idaho, Louisiana,	Nevada,	New Mexico, Puerto R	ico, Texas, Washingto	on and Wi	sconsin.)	
		No Yes. Mak	ke sure you fill out <i>Scl</i>	hedule H: Your Codebtors	(Official	Form 106H).				
Par	t 2	Explain	the Sources of You	r Income						
4.	Fill in	n the total	amount of income yo	nployment or from opera u received from all jobs a have income that you rec	nd all bus	sinesses, including part	-time activities.	ous calend	dar years?	
		No Yes. Fill i	n the details.							
				Dobtor 1			Debtor 2			
				Debtor 1 Sources of income	G.	ross income	Sources of incom	•	Gross income	
				Check all that apply.	(be	efore deductions and clusions)	Check all that apply		(before deductions and exclusions)	

Case 25-12476-JNP Doc 1 Filed 03/10/25 Entered 03/10/25 23:56:31 Desc Main Document Page 31 of 49 Debtor 1 Betty Anna Slovick Case number (if known) Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until **Social Security** \$1,839.00 the date you filed for bankruptcy: **Benefits** Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Reason for this payment **Total amount** Amount you paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Insider's Name and Address

Dates of payment

Dates of payment

Dates of payment

paid

Amount you

still owe

Reason for this payment
Include creditor's name

Include payments on debts guaranteed or cosigned by an insider.

Yes. List all payments to an insider

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Deb	otor 1 Betty Anna Slovick		Case number	(if known)		
Par	t 4: Identify Legal Actions, Repossession	ons, and Foreclosures				
9.	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.					
	■ No					
	☐ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency	Status of th	e case	
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details below		rty repossessed, foreclosed	d, garnished, attached	I, seized, or levied?	
	No. Go to line 11.Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date	Value of the	
		Explain what happened			property	
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment be No Yes. Fill in the details.		uding a bank or financial in	stitution, set off any a	mounts from your	
	Creditor Name and Address	Describe the action the	creditor took	Date action was		
				taken		
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or No Yes		rty in the possession of an	assignee for the bene	ent of creditors, a	
Par	t 5: List Certain Gifts and Contributions	S				
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	ıptcy, did you give any gifts	with a total value of more t	han \$600 per person′	?	
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave V the gifts		
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co		or contributions with a tota	al value of more than	\$600 to any charity?	
	Gifts or contributions to charities that to		contributed	Dates you	Value	
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)			contributed		
Par	t 6: List Certain Losses					
	Within 1 year before you filed for bankrup or gambling?	otcy or since you filed for ba	ankruptcy, did you lose any	thing because of thef	t, fire, other disaster,	
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and	Describe any insurance co	verage for the loss	Date of your	Value of property	
		Include the amount that insur insurance claims on line 33 o		loss	lost	

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Debtor 1 Betty Anna Slovick

Case number (if known)

Par	7: List Certain Payments or Transfers								
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.								
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and v transferred	alue of any prope	c	Date payment or transfer was nade	Amount of payment			
	Cricket Debt Counseling 219 SW Harvey Milk St Portland, OR 97204	Credit counseli	ng	2	2024	\$0.00			
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you	s or to make payments			ransfer any prope	rty to anyone who			
	■ No								
	Yes. Fill in the details.	5							
	Person Who Was Paid Address	Description and v transferred	alue or any property		Date payment or transfer was nade	Amount of payment			
18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your but include both outright transfers and transfers mainclude gifts and transfers that you have already No Yes. Fill in the details.	isiness or financial affa de as security (such as t	iirs? he granting of a sec						
	Person Who Received Transfer Address		property transferred		property or ceived or debts ange	Date transfer was made			
	Person's relationship to you								
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prof		y property to a sel	lf-settled trust	or similar device	of which you are a			
	Yes. Fill in the details.								
	Name of trust	Description and v	, , ,			Date Transfer was made			
Dos	2. List of Contain Financial Assessment Inc.	tuumanta Safa Damaait	Davis and Ctars	as Haits					
Par	8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and Stora	ige Units					
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc	r other financial accou	nts; certificates of	•	, .	, ,			
	■ No □ Yes. Fill in the details.								
		Look A dimits of	Tuno of account	On Dete		l act balance			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument			Last balance before closing or transfer			

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Debtor 1	Betty	Anna	Slo	vic	k

Case number (if known)

21.	Do you now have, or did you have within cash, or other valuables?	n 1 year before you filed for bankruptcy, ar	ny safe deposit box or other deposito	ory for securities,
	No			
	Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	. Have you stored property in a storage ur	nit or place other than your home within 1	year before you filed for bankruptcy	?
	■ No □ Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code	who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Pai	art 9: Identify Property You Hold or Cont	trol for Someone Else		
23.	Do you hold or control any property that for someone.	someone else owns? Include any propert	ty you borrowed from, are storing fo	r, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Pai	art 10: Give Details About Environmental	Information		
For	r the purpose of Part 10, the following defi	nitions apply:		
		tate, or local statute or regulation concern to the air, land, soil, surface water, ground ese substances, wastes, or material.		
	Site means any location, facility, or prop to own, operate, or utilize it, including di	erty as defined under any environmental l isposal sites.	aw, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an e hazardous material, pollutant, contamina	environmental law defines as a hazardous ant, or similar term.	waste, hazardous substance, toxic	substance,
Rep	port all notices, releases, and proceedings	that you know about, regardless of when	they occurred.	
24.	. Has any governmental unit notified you	that you may be liable or potentially liable	under or in violation of an environm	ental law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code	e) Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	. Have you notified any governmental unit	t of any release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

Page 35 of 49 Document Debtor 1 Betty Anna Slovick Case number (if known) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Business Name Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Betty Anna Slovick **Betty Anna Slovick** Signature of Debtor 2 Signature of Debtor 1 Date March 10, 2025 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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___. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

☐ Yes. Name of Person

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Doc 1

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Fill in this information to identify your case:				
Debtor 1	Betty Anna Slovi	ck		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JEI	RSEY, CAMDEN VICINAGE	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	Yes
property	Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

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Debtor 1 Betty Anna Slovick			Case	Case number (if known)		
De	me: escription of operty curing debt:		 □ Retain the property and redee □ Retain the property and enter in Reaffirmation Agreement. □ Retain the property and [explain the property and property and property and property and [explain the property and [ex	nto a Yes		
or and the found	ny unexpired pe information bel nay assume an ι	ow. Do not list real estate unexpired personal prope	t you listed in Schedule G: Executory Contract eleases. Unexpired leases are leases that are rty lease if the trustee does not assume it. 11	- ",,		
Desc	cribe your unexp	ired personal property le	ases	Will the lease be assumed?		
Less	or's name:	Franklin Square Villa	ge Apartments	□ No ■ Yes		
Desc Prop	cription of leased erty:	Residential lease		■ Tes		
	r penalty of perj		ndicated my intention about any property of n	ny estate that secures a debt and any personal		
_	/s/ Betty Anna		X			
	Betty Anna Slo Signature of Deb		Signature of Debto	or 2		
	Date March	n 10, 2025	Date			

Fill in this inf	formation to identify your case:		Ch	aak ana hay	م مم برام	live et ad in this form on	d in Form
Debtor 1	Betty Anna Slovick			eck one box 2A-1Supp:	only as c	lirected in this form and	ı in Follii
Debtor 2				■ 1 Thoroi	e no proc	umption of abuse	
(Spouse, if filing)					•	·	
United State	District of New Je Search Sear	rsey, Camden	'	applies	s will be r	o determine if a presu nade under <i>Chapter 7</i> icial Form 122A-2).	
Case numbe	er					does not apply now by service but it could a	
				☐ Check if	this is a	n amended filing	
Official	Form 122A - 1						
Chapte	r 7 Statement of Your Cu	rent Mor	nthly Inc	ome			12/19
attach a separ case number (qualifying mili	te and accurate as possible. If two married people rate sheet to this form. Include the line number to violate sheet to this form. Include the line number to violate the statement of the statement of the statement of Exemple Calculate Your Current Monthly Income	vhich the additior m a presumption	nal information a of abuse becau	applies. On the	e top of a have pri	ny additional pages, wri marily consumer debts o	te your name and or because of
1. What is	s your marital and filing status? Check one or	າly.					
■ Not	married. Fill out Column A, lines 2-11.						
☐ Mar	ried and your spouse is filing with you. Fill o	ut both Columns	A and B, lines	2-11.			
☐ Mar	ried and your spouse is NOT filing with you.	You and your s	spouse are:				
	iving in the same household and are not lega	ally separated.	Fill out both Co	lumns A and	B, lines	2-11.	
ļ p	iving separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evadi	egally separated	d under nonban	kruptcy law	hat appli	es or that you and you	
101(10A). If the 6 month	average monthly income that you received from all For example, if you are filing on September 15, the 6-nhs, add the income for all 6 months and divide the tota wn the same rental property, put the income from that p	nonth period would I by 6. Fill in the re	be March 1 thro	ugh August 31 de any income	If the amount m	ount of your monthly incor ore than once. For examp	ne varied during ole, if both
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, deductions).	and commission	ons (before all	\$	0.00	\$	
	ny and maintenance payments. Do not include n B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you from ar and roo	ounts from any source which are regularly por your dependents, including child support a unmarried partner, members of your house as pommates. Include regular contributions from a specific product include a support including a support include a s	. Include regular d, your depende	contributions nts, parents,	\$	0.00	\$	
	. Do not include payments you listed on line 3. come from operating a business, profession,	or farm		Ψ		Ψ	
0. 1101 1110	ome nom operating a basiness, profession,		otor 1				
Gross r	receipts (before all deductions)	\$ 0.00					
Ordina	ry and necessary operating expenses	-\$ 0.00					
Net mo	onthly income from a business, profession, or far	m \$ 0.00 _	Copy here ->	\$	0.00	\$	
6. Net inc	come from rental and other real property	Deb	otor 1				
Gross r	receipts (before all deductions)	\$ 0.00					
	ry and necessary operating expenses	-\$ 0.00					
	onthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
7. Interes	st, dividends, and royalties			\$	0.00	\$	

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Case number (if known)

			Column A Debtor 1		Column B Debtor 2 o non-filing		
8. Unemployment compensation			\$	0.00	\$		
Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:		t under					
For you \$ For your spouse \$	0.0	0					
For your spouse \$							
9. Pension or retirement income. Do not include any ambenefit under the Social Security Act. Also, except as strong include any compensation, pension, pay, annuity, or United States Government in connection with a disability disability, or death of a member of the uniformed servic pay paid under chapter 61 of title 10, then include that places not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chapter.	nount received that was cated in the next senten ar allowance paid by the y, combat-related injuryes. If you received any only to the extent the would otherwise be en	y or retired	\$	0.00	\$		
 Income from all other sources not listed above. Sp. Do not include any benefits received under the Social S 		nount.					
received as a victim of a war crime, a crime against hur domestic terrorism; or compensation pension, pay, anr United States Government in connection with a disability disability, or death of a member of the uniformed servic sources on a separate page and put the total below	nanity, or international on nuity, or allowance paid y, combat-related injury	by the y or	\$	0.00	\$		
·		_	\$	0.00	\$		
Total amounts from separate pages, if any.			\$	0.00	\$		
	1		Ψ		<u> </u>		\neg
Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total for C		\$	0.00	+ \$		Total current monthly income	-
Part 2: Determine Whether the Means Test Applies to	o You						
12. Calculate your current monthly income for the year.	Follow these steps:						
12a. Copy your total current monthly income from line 1	1		Con	y line 11 h	nere=>	\$ 0.00	
12a. cop, your total our on morning moonle non-time	·			,			-
Multiply by 12 (the number of months in a year)						x 12	
12b. The result is your annual income for this part of the							
120. The result is your annual income for this part of the	e form				12b	0.00	-
·		s·			12b	0.00	
13. Calculate the median family income that applies to	you. Follow these steps	S:			12b	0.00	_
·		s:			12b	0.00	_
13. Calculate the median family income that applies to	you. Follow these steps	S:			12b	0.00	-
13. Calculate the median family income that applies to give.	NJ 1 of household. online using the link sp		in the separ		13.	o. \$ 0.00	-]
13. Calculate the median family income that applies to y Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size To find a list of applicable median income amounts, go	NJ 1 of household. online using the link sp				13.	o. \$ 0.00	-]
13. Calculate the median family income that applies to see Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	NJ 1 of household. online using the link spruptcy clerk's office.	ecified i	in the separ	ate instruct	13. tions	\$	-]
13. Calculate the median family income that applies to y Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	NJ 1 of household. online using the link spruptcy clerk's office.	ecified i	in the separ	ate instruct	13. tions	\$	-]
13. Calculate the median family income that applies to grill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank 14. How do the lines compare? 14a. Line 12b is less than or equal to line 13. O	NJ 1 of household. online using the link spruptcy clerk's office. n the top of page 1, che Form 122A-2.	ecified	in the separ	ate instruct	13. tions ption of abus	\$	-]
13. Calculate the median family income that applies to get Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank 14. How do the lines compare? 14a. Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official 14b. Line 12b is more than line 13. On the top of	NJ 1 of household. online using the link spruptcy clerk's office. n the top of page 1, che Form 122A-2.	ecified	in the separ	ate instruct	13. tions ption of abus	\$	-]
13. Calculate the median family income that applies to y Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank 14. How do the lines compare? 14a. Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	NJ 1 of household. online using the link spruptcy clerk's office. In the top of page 1, che Form 122A-2. If page 1, check box 2,	ecified eck box The pre	in the separ 1, <i>There is</i> es <i>umption</i> o	ate instruct	13. tions ption of abus determined b	\$ 0.00 \$ 81,843.00 See.	-]
13. Calculate the median family income that applies to y Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank 14. How do the lines compare? 14a. Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury	NJ 1 of household. online using the link spruptcy clerk's office. In the top of page 1, che Form 122A-2. If page 1, check box 2,	ecified eck box The pre	in the separ 1, <i>There is</i> es <i>umption</i> o	ate instruct	13. tions ption of abus determined b	\$ 0.00 \$ 81,843.00 See.	-]
13. Calculate the median family income that applies to y Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank 14. How do the lines compare? 14a. Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2. Part 3: Sign Below	NJ 1 of household. online using the link spruptcy clerk's office. In the top of page 1, che Form 122A-2. If page 1, check box 2,	ecified eck box The pre	in the separ 1, <i>There is</i> es <i>umption</i> o	ate instruct	13. tions ption of abus determined b	\$ 0.00 \$ 81,843.00 See.	-]

Betty Anna Slovick

Debtor 1

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Debtor 1	Betty Anna Slovick	Case number (if known)	
Da	ate March 10, 2025		
	MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
+ \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of New Jersey, Camden Vicinage

In r	In re Betty Anna Slovick	Case No.	
	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSATION OF ATTO	RNEY FOR DE	BTOR(S)
1.	. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attor compensation paid to me within one year before the filing of the petition in bankrupted be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankrupted between the connection with the bankrupted bankrupted by the connection with the bankrupted by the connection by the connection with the bankrupted by the connection by the connection with the bankrupted by the connection by	y, or agreed to be paid t	to me, for services rendered or to
	For legal services, I have agreed to accept	\$	0.00
	Prior to the filing of this statement I have received		0.00
	Balance Due	\$	0.00
2.	. The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
3.	. The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
4.	I have not agreed to share the above-disclosed compensation with any other person	n unless they are memb	ers and associates of my law firn
	☐ I have agreed to share the above-disclosed compensation with a person or persons copy of the agreement, together with a list of the names of the people sharing in the		
5.	. In return for the above-disclosed fee, I have agreed to render legal service for all aspec	cts of the bankruptcy ca	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in debtor. b. Preparation and filing of any petition, schedules, statement of affairs and plan whice. Representation of the debtor at the meeting of creditors and confirmation hearing, ad. [Other provisions as needed] The fee agreement signed between debtor and law firm will contribute file supplemental fee applications or fee applications on notice to 	ch may be required; and any adjourned hear ol fees. Debtor's co	ings thereof; bunsel reserves the right to
6.	By agreement with the debtor(s), the above-disclosed fee does not include the following 1. Defense or prosecution of any adversarial complaint including 2. Defense or prosecution of relief for stay motion 3. Challenge or avoidance of any proof of claim 4. Additional 341(a) appearance or confirmation hearing 5. Motion to sell or refinance real estate 6. Application to employ professional		•

- 6
 - 6. Application to employ professional
 - 7. Conversion from or to Chapter 7 or 13 or conversion from or to Chapter 13 to 7
 - 8. Notice of settlement of controversy
 - 9. Amendments to add additional creditors
 - 10. Costs relating to credit reports, judgment searches, couriers, experts, travel and or extraordinary Pacer or duplication costs/charges etc.
 - 11. Reponse to audit or United States trustee objection to case
 - 12. Preparation and or appearance at 2004 deposition

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In re	Betty Anna Slovick	Case No.	
	Debtor(s)		

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

	CERTIFICATION						
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in his bankruptcy proceeding.							
March 10, 2025	/s/ Lee M. Perlman, Esquire						
Date	Lee M. Perlman, Esquire						
	Signature of Attorney						
	Lee M. Perlman, Esquire						
	1926 Greentree Rd Ste 100						
	Cherry Hill, NJ 08034						
	856-751-4224 Fax: 856-751-4226						
	ecf@newjerseybankruptcy.com						
	Name of law firm						

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United States Bankruptcy Court District of New Jersey, Camden Vicinage	
	Case No.

In re	Betty Anna Slovick		Case No.		
		Debtor(s)	Chapter	7	
VERIFICATION OF CREDITOR MATRIX					
The abo	ove-named Debtor hereby verifies the	hat the attached list of creditors is true and correct	to the best	of his/her knowledge.	
Date:	March 10, 2025	/s/ Betty Anna Slovick Betty Anna Slovick			
		Signature of Debtor			

Cardiovascular Associates of DE Valley The Heart House 210 West Atlantic Ave Haddon Heights, NJ 08035

Carepayment PO Box 2398 Omaha, NE 68103

ComenityCapital/Boscov Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Franklin Square Village Apartments 301 South Hildebrand Ave Glendora, NJ 08029

Inspira Health PO Box 547 Wheeling, IL 60090

Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346

Jpmcb MailCode LA4-7100 700 Kansas Lane Monroe, LA 71203

PNC Financial Attn: Bankruptcy 300fifth Ave Pittsburgh, PA 15222

PNC Financial Services Attn: Bankruptcy 300 Fifth Ave Pittsburgh, PA 15222

State of New Jersey PO Box 283 Trenton, NJ 08602

TD Bank 1701 Route 70 E Cherry Hill, NJ 08003